FOR INSTRUCTIONS, SEE BACK OF FORM		FORM	
DISCLOSURE SUMMARY	- IN ETHING AND	DR-2	DISCLOSURE
COMMITTEE NAME (Must be same as on Statement of C	rganization)	(Rev. 12/2005)	
approved Country Dimers of Cent	Tal Coramiday 17 PM 1:0	For Office Use of Comm. #	9004
IMPORTANT: Indicate by # type of committee you are reporting (1) Statewide/Legislative/Judge Standing for Retention Candidate (4) County Central Committee (5) County Candidate (6) City Casubdivision Candidate (8) County FAC (9) City PAC (10) Sch (11) Local Ballot Issue	e (2)State PAC (3)State Party andidate (7)School Board or Other Political	Scanned	
CANDIDATE COMMITTEES ONLY:			
Candidate Name	Political Party (if applicable)		
Office Sought	District (if Senate or House)		
Late reports are subject to possible civil and criminal penalties, and the chairperson, for any other type of committee, is the ind SIGNATURE OF PERSON FILING REPORT	vidual responsible for filing timely and accu	urate reports.	
May 19 2010	,		
AM FILING A May 19 2010	REPORT FOR (1) ELECTION /(2)NON-ELECTION Y	EAR.
(feport date)	Indicate by #	2	
CHECK IF AMENDMENT TO REPORT DATED	Lo	ocal Committees, enter C	Date of Election
☐ Check if this is final (termination) report and attach Notice (You must continue to file reports until a DR-3 is file		ounty & Local Committee nich Election is held	es, enter County in
	Les		
STATE	MENT OF CASH ON HAND		
CASH ON HAND at the beginning of the reporting period. (committee. This amount MUST be the same as the of the last reporting period or must be zero if this is	e cash on hand at the end	s2	093.59
ADD TOTAL MONEY TAKEN IN THIS PERIOD			
Schedule A: Cash Contributions total (Attach Sche	edule A) (*also see in-kind below)		1111.75
Schedule F: Loans Received total (Attach Schedu	-		0
Schedule H: Total Sales of Campaign Property (A	·		0
(Schedule H applies to Candidates' Co			
	SUB-TOTAL	\$ 3	705 21/
SUBTRACT TOTAL MONEY SPENT THIS PERIO			205.34
Schedule B: Expenditures total (Attach Schedule B			369.38
Schedule F: Loan Repayments total (Attach Sched	•	***************************************	0
CASH ON HAND at the end of this reporting period (if final n			
be zero) (Attach DR-3)	•	\$ <u> </u>	2835,96
"UNPAID BILLS (From Schedule D - Attach Schedule D)		\$	0
IN KIND CONTRIBUTIONS (From Schedule E - Attach Sch			0
OUTSTANDING LOANS (From Schedule F - Attach Sched			0
CONSULTANT BREAKDOWN (Schedule G Attached?)		YES/	NO
CANDIDATE COMMITTEES ONLY:			
VALUE OF CAMPAIGN PROPERTY (From Schedule H - At	tach Schedule H)	5	0
STATE COMMITTEES: Submit a reconciled campaign acco	•	·	

CONTRIBUTIONS - MONEY TAKEN IN (Including candidate's personal funds)			(Rev. 02/96)	MONETARY RECEIPTS	
COMMITTEE I	NAME (Must be same	. —	CHECK THIS BOX IF AMENDING FORM		
NUMBER AND THE DISCLOSURE BOA CAUTION: Sec	E PAC CHECK NUMBER IN 1 ARD. Ition 68B.32A(6), towa C	OUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTHE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM PROMITION COPIED FROM THE PROPERTY AND STATEMENT OF THE PROPERTY O	OM THE IOWA ETHICS A	nd Campaign	
DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	
1/6/10	ID#	Callection at Meeting		\$ 220.00	
1/12/10	ID# CK#	Collection at Meeting		30.00	
2/3/10	ID# CK#	Collection at Meeting		137.00	
3/5/10	ID# CK#	Collection at Meeting		140.00	
3/19/10	ID# CK#	Les Callected at Convention		334.75	
5/5/10	ID#	Collectionat Meeting		25000	
	ID# CK#				
	ID# CK#				
	ID# CK#				
	ID#				

For instructions, See Back of Form

CK#

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage) (See Page 2 of forms packet.). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page _____ of _____ (for Schedule A)

SUB-TOTAL

TOTAL (if last page of this schedule)

SCHEDULE

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES - MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 09/97)	MONETARY EXPENDITURES
	K THIS BOX IF

COMMITTE	E NAME (Must be	same as on Statement of Organization)		
arka	α	<i>(</i>)	Possenttee	
DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursament) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1/9/10	ID# CK#	18-80 Club- 308 N. 12th St. Centeures fa 52544	Bental for Caucas Training	\$ 25.00
3/10/10	ID# CK#	Quile . Com P.O Box 3700 Philasephia, Pa. 19101	Sufflix for Country Convention	93.38
4/28/10	ID# CK#	Auto Owners P.o Box 30315 Lancing Mi 48909	Insurance for	17600
5/1/10	ID# CK#	Appanoon Country Fan Brond 3336 500 Explicate 52555	Democrat Party Booth rent for levely Felici	75.00
	ID# CK#		•.	
	ID#			
	ID# CK#	-		
l	ID# CK#			
			SUB-TOTAL TOTAL (if last page of this schedule)	•

		MITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 56.6(3)(i).)

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Page .		_ of	